To be used for initial registrations and renewals.

LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

414

FOR OFFICE USE ONLY

1-30-01

#6116

$1000

Reg

1010414

Instructions

- Print in ink or type.
- Complete form and return with $10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (225) 922-1400 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1.

1. NAME Frost Gregory D.
Last First MI

2. BUSINESS PHONE (225) 929-7033
Area Code and Phone Number

2. BUSINESS ADDRESS 8440 Jefferson Hwy., Suite 301 Baton Rouge LA 70809
Street and No. City State Zip

3. MAILING ADDRESS (SAME AS ABOVE)
Street and No. City State Zip

4. EMPLOYER Roedel, Parsons, Koch, Frost, Balhoff & McCollister

HAND DELIVERED

5. EMPLOYER'S ADDRESS (SAME AS ABOVE)
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name SEE ATTACHED LISTING

Address

Business or purpose

Does this person pay you?

If No, who pays you?

Form 500, Rev. 6/99

LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

414

2. Name_____

   Address_____

   Business or purpose_____

   Does this person pay you?_____

   If No, who pays you?_____

3. Name_____

   Address_____

   Business or purpose_____

   Does this person pay you?_____

   If No, who pays you?_____

4. Name_____

   Address_____

   Business or purpose_____

   Does this person pay you?_____

   If No, who pays you?_____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

_____
Signature of Lobbyist

LOBBYING LIST FOR GREGORY D. FROST ** Paying Client

**	COLUMBIA/HCA HEALTHCARE CORPORATION 1440 Canal Street, Suite 1901 New Orleans, LA 70112	Healthcare
	HEALTHCARE PROVIDER MANAGEMENT P. O. Box 66776 Baton Rouge, LA 70896	Healthcare
**	LOUISIANA HEALTH INFORMATION MGMT. ASSOC. 2613 Birchwood Drive Monroe, LA 71201	Healthcare
**	LOUISIANA PSYCHOLOGICAL ASSOCIATION Post Office Box 66924 Baton Rouge, LA 70896	Healthcare
	ROEDEL, PARSONS, KOCH, FROST, BALLHOFF & MCCOLISTER 8440 Jefferson Highway, Suite 301 Baton Rouge, LA 70809	Legal/General
**	HOME CARE ASSOCIATION OF LA 223-A E. Main Street New Iberia, LA 70560	Healthcare
**	LA ASSISTED LIVING ASSOCIATION P.O. Box 66933 Baton Rouge, LA	Healthcare
**	HEALTH ALLIANCE 875 N. Michigan Ave., Suite 2935 Chicago, IL 60611	Healthcare
**	DELIVERMED.COM 875 N. Michigan Ave., Suite 2935 Chicago, IL 60611	Healthcare